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TRANSMITTAL FORM				, application running	10/710,	10/710,854				
				Filing Date	08/08/2	08/08/2004				
				First Named Inventor	David W	David W. Burns				
			Art Unit	2629	2629					
(to be used for all correspondence after initial filing)			Examiner Name	Regina	Regina Liang					
10			16	Attorney Docket Number	DWB00	DWB002				
Total Number of Pages III This Submission										
ENCLOSURES (Check all that apply)										
Fee Trans	smittal Fo	orm		Orawing(s)				Allowance Communication to TC		
l <u></u>	Fee Attached			icensing-related Papers			of Appeals and Interferences			
Amendme	Amendment/Reply			Petition Petition to Convert to a			(Appea	Il Communication to TC al Notice, Brief, Reply Brief)		
	After Final			Provisional Application Power of Attorney, Revoca	tion			etary Information		
	Affidavits/declaration(s) Extension of Time Request			Change of Correspondence Ferminal Disclaimer	e Audress		Other Enclosure(s) (please Identify below):	Enclosure(s) (please Identify		
Express Abandonment Request			│□ F	Request for Refund				•		
Information Disclosure Statement				CD, Number of CD(s)						
			Landscape Table on CD							
Certified Copy of Priority Document(s)			Remar	KS						
Reply to Missing Parts/ Incomplete Application										
Reply to Missing Parts under 37 CFR 1.52 or 1.53										
		SIGNA	TURE O	F APPLICANT, ATT	ORNEY,	OR AG	ENT			
Firm Name										
Signature /David W. Burns/										
Printed name David W. Burns										
Date 09/21/2006				Reg. No.	52,67	52,676				
		С	ERTIFIC	ATE OF TRANSMIS	SION/M	AILING				
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Face pure	Effective on 12/		E/U D 4040\	Complete if Known								
Fees pursuant to t	Application Number 10/		10/710,854	0/710,854								
FEE	Filing Date 0		08/08/2004									
	For FY	2006		First Named In	ventor	David W. B	urns					
Applicant cla	aims small entity st	atus See 37 CE	R 1 27	Examiner Name		Regina Liang						
	Art Unit 262		2629	629								
TOTAL AMOUN	Attorney Docke	Attorney Docket No. DWB00		2								
METHOD OF I	PAYMENT (checl	k all that apply)										
Check Credit Card Money Order Other (please identify):												
Deposit Account Deposit Account Number: Deposit Account Name:												
	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee												
Charge any additional fee(s) or underpayments of fee(s)												
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.												
FEE CALCUL									\exists			
1. BASIC FILIN	NG, SEARCH, AI								7			
		NG FEES		RCH FEES	EXAN	INATION F						
Application 1	<u>Гуре</u> <u>Fee (</u> \$	\$\frac{Small Entity}{\frac{\\$}{2}} \frac{\\$}{2}	<u>Fee (\$</u>	Small Entity Fee (\$)	Fee (<u>Small Eı</u> (\$) <u>Fee (</u> \$		Fees Paid (\$)				
Utility	300	150	500	250	200							
Design	200	100	100	50	130	65		_ 				
Plant	200	100	300	150	160	80						
Reissue	300	150	500	250	600	300						
Provisional	200	100	0	0	0							
2. EXCESS CI								Small Entity				
Fee Description Each claim	<u>on</u> over 20 (includin	ig Reissnes)) (\$) 50	<u>Fee (\$)</u> 25				
	endent claim over		leissues)				00	100				
Multiple de	pendent claims		,			36	60	180				
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Total Sheet	sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)											
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4. OTHER FEE Non-Englis	(S) h Specification,	\$130 fee (no s	small entity	discount)				Fees Paid (\$)				
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UBMITTED BY	/D1344 5		Т	Registration No. (Attorney/Agent)			plenhans	100 700 700				
ignature	/David W. Burns/			(Attorney/Agent)	52,676		Telephone 408-729-6375					
ame (Print/Type)	pe) David W. Burns Date 09/21/2006							1/2006				

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